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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/625,886	<b>FILING DATE</b> 07/26/2000 <b>RULE</b> -	<b>CLASS</b> 227	<b>GROUP ART UNIT</b> 3721	<b>ATTORNEY DOCKET NO.</b> 1695 CIP CON III
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A CON OF 09/497,647 02/03/2000 ABN  
WHICH IS A CON OF 09/119,543 07/20/1998 PAT 6,032,849  
WHICH IS A CIP OF 08/520,202 08/28/1995 PAT 5,762,256

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

None

**IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 09/15/2000**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWING</b> 38	<b>TOTAL CLAIMS</b> 1	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				

**ADDRESS**

United States Surgical Corp  
150 Glover Avenue  
Norwalk, CT 06856

**TITLE**

Surgical stapler

<b>FILING FEE RECEIVED</b> 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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